

## FINANCIAL AFFIDAVIT

CJA 23  
(Rev. 5/98)

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

IN UNITED STATES  
IN THE CASE OF☐ MAGISTRATE ☒ DISTRICT ☐ APPEALS COURT or ☐ OTHER PANEL (Specify below)

United States vs. McCormick

FOR Northern District  
F I Eastern Division

LOCATION NUMBER

DOCKET NUMBERS

Magistrate

District Court

08CR539

Court of Appeals

PERSON REPRESENTED (Show your full name)

Kevin McCormick

JUL 18 2008  
7-18-08MICHAEL W. DOBBINS  
CLERK, U.S. DISTRICT COURT

CHARGE/OFFENSE (describe if applicable &amp; check box →)

☒ Felony☐ Misdemeanor

7 Use 13(a)(A) 18 Use 134(a)(3)

☒ Defendant - Adult☐ Defendant - Juvenile☐ Appellant☐ Probation Violator☐ Parole Violator☐ Habeas Petitioner☐ 2255 Petitioner☐ Material Witness☐ Other (Specify)

## ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

## EMPLOYMENT

Are you now employed? ☐ Yes ☐ No ☒ Am Self Employed

Name and address of employer:

IF YES, how much do you  
earn per month? \$ 5,000IF NO, give month and year of last employment  
How much did you earn per month? \$If married is your Spouse employed? ☒ Yes ☐ NoIF YES, how much does your  
Spouse earn per month? \$ 200If a minor under age 21, what is your Parents or  
Guardian's approximate monthly income? \$

## OTHER INCOME

Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? ☐ Yes ☒ No

RECEIVED

SOURCES

IF YES, GIVE THE AMOUNT

RECEIVED & IDENTIFY \$  
THE SOURCES

## CASH

Have you any cash on hand or money in savings or checking account? ☒ Yes ☐ No IF YES, state total amount \$ 300.00

## PROPERTY

Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? ☒ Yes ☐ No

VALUE

DESCRIPTION

IF YES, GIVE THE VALUE AND \$  
DESCRIBE IT2000  
3002005 Honda  
2007 Honda (no equity)  
home in foreclosure (no equity)

## DEPENDENTS

MARITAL STATUS

☐ SINGLE☒ MARRIED☐ WIDOWED☐ SEPARATED OR  
DIVORCEDTotal  
No. of  
Dependents  
4

List persons you actually support and your relationship to them

74.0  
1440  
1140OBLIGATIONS  
& DEBTSDEBTS &  
MONTHLY  
BILLS(LIST ALL CREDITORS,  
INCLUDING BANKS,  
LOAN COMPANIES,  
CHARGE ACCOUNTS,  
ETC.)APARTMENT  
OR HOME:

Creditors

Total Debt

Monthly Pay.

Mortgage

Credit cards (2)

Car payments

Utilities

\$

\$

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I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) 7.18.08

SIGNATURE OF DEFENDANT  
(OR PERSON REPRESENTED)

[Signature]